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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. Le A 35 012

(Only for new nonprovisional applications under 37 CFR 1.53(b))

First Inventor	Guido Henning
Method for Increasin  Title Tumors and Their Pr	g Clinical Specificity When Detecti
Express Mail Label No.	

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APPLICA	TION ELEMENTS	1	4DDI	RESS TO: Box	Patent Ap	plicati	
	erning utility patent application conte	nts.		Was	hington, l	DC 20	231
2. Applicant claims si See 37 CFR 1.27.  3. X Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regalance - Reference to se	[Total Pages 17 ]	•	(if ap	CD-ROM or CD-R in Computer Program (eotide and/or Amino Acopticable, all necessary Computer Readable pecification Sequence i. CD-ROM of	Appendix cid Seque ) e Form (C Listing or	c) ence Si CRF) n:	ubmission
- Background of	the Invention	_	с	Statements verifyir	ng identity	of ab	ove copies
- Brief Summary - Brief Description	of the Invention n of the Drawings ( <i>if filed</i> )	Į	Α	CCOMPANYING A	APPLIC	ATIC	N PARTS
- Detailed Descri - Claim(s) - Abstract of the	ption Disclosure	7.	9 10 11.	Assignment Papers 37 CFR 3.73(b) Sta (when there is an a English Translation	atement issignee)		Power of Attorney
4 Drawing(s) (35 U	.S.C. 113) [ Total Sheets L	-	=	Information Disclos		(,, a	Copies of IDS
5. Oath or Declaration	Total Pages	] ]	12.	Statement (IDS)/P	TO-1449	L	☐ Citations
a. Newly execu	ited (original or copy)	ľ	13. <b>X</b>				
b. Copy from a (for continual	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed	)	14.	Return Receipt Po (Should be specific	ally itemi:	zed)	•
i. DELETION OF INVENTOR(S) Stand statement attracted deleting inventor(s)  15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)							
named in the prior application, see 37 CFR 1 63(d)(2) and 1.33(b).  Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35			5 U.S.C. 122				
6. X Application Data	Sheet. See 37 CFR 1.76		17.	or its equivalent.  Other:			••••••
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application No.							
Prior application information Examiner Group Art Unit:							
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
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Country	US	Telepho	ne		Fa	ax	(203) 812-5492
Name (Print/Type)	Susan M. Pellegrino		Regis	stration No. (Attorne)	v/Agent)	48,97	72
Signature	Suson M. Pee	liau	<i>a</i> . <i>a</i> .		Date	12	117/01

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## FEE TRANSMITTAL for FY 2001 Patent fees are subject to annual revision Complete if Known Application Number Filing Date First Named Inventor Examiner Name Group Art Unit

740.00 TOTAL AMOUNT OF PAYMENT (\$) Attorney Docket No. Le A 35 012 FEE CALCULATION (continued) **METHOD OF PAYMENT** 3. ADDITIONAL FEES The Commissioner is hereby authorized to charge 1. X indicated fees and credit any overpayments to. Large Small Deposit Entity Entity Account Number 13-3372 Fee Paid Fee Fee Fee Fee Code (\$) Fee **Fee Description** Deposit Surcharge - late filing fee or oath 105 130 205 65 Jeffrey M. Greenman Account Surcharge - late provisional filing fee or cover sheet 127 50 227 25 Charge Any Additional Fee Required X Under 37 CFR 1.16 and 1.17 Non-English specification 139 130 139 130 Applicant claims small entity status. See 37 CFR 1 27 For filing a request for ex parte reexamination 147 2.520 147 2.520 Requesting publication of SIR prior to Examiner action Payment Enclosed: 112 920\* 112 920\* Check Credit card Other 113 1,840\* 113 1,840\* Requesting publication of SIR after **FEE CALCULATION** Extension for reply within first month 110 215 55 115 1. BASIC FILING FEE Extension for reply within second month 216 195 116 390 Large Entity Small Entity Extension for reply within third month 890 217 445 Fee Fee Fee Description 117 Fee Paid Code (\$) Code (\$) Extension for reply within fourth month 118 1,390 218 695 201 355 Utility filing fee 101 710 740.00 128 1.890 228 945 Extension for reply within fifth month 106 320 206 160 Design filing fee 310 219 155 119 Notice of Appeal 107 490 207 245 Plant filing fee 120 310 220 155 Filing a brief in support of an appeal Reissue filing fee 108 710 208 355 Request for oral hearing 121 270 221 135 Provisional filing fee 75 114 150 214 Petition to institute a public use proceeding 138 1,510 138 1,510 SUBTOTAL (1) (\$) 740.00 Petition to revive - unavoidable 140 110 240 2. EXTRA CLAIM FEES Petition to revive - unintentional 141 1,240 241 620 Fee from Utility issue fee (or reissue) Ext<u>ra Claim</u>s Fee Paid 142 1,240 242 620 Extra Claims below Fee Paid  $-20^{++} = \boxed{0} \times \boxed{18.00} = \boxed{0.00}$ Design issue fee 243 220 143 440 Total Claims Independent × **84.00** = 0.00 Plant issue fee - 3\*\* = 0 144 600 244 300 280.00 = 0 · ŎŎ 0 Petitions to the Commissioner 122 130 122 130 Multiple Dependent Processing fee under 37 CFR 1.17(q) 50 123 50 123 Large Entity Small Entity Submission of Information Disclosure Stmt 180 126 180 126 Fee Fee Fee Description Fee Fee Code (\$) Code (\$) 40 581 40 Recording each patent assignment per 581 property (times number of properties) Claims in excess of 20 103 18 203 9 Filing a submission after final rejection (37 CFR § 1.129(a)) 146 710 246 Independent claims in excess of 3 102 80 202 40 104 270 204 135 Multiple dependent claim, if not paid For each additional invention to be examined (37 CFR § 1 129(b)) 710 249 355 149 \*\* Reissue independent claims 109 80 209 40 over original patent 279 Request for Continued Examination (RCE) 710 355 179 \*\* Reissue claims in excess of 20 110 18 210 and over original patent Request for expedited examination 900 169 169 of a design application 740.00 Other fee (specify) (\$) SUBTOTAL (2) (\$) \*Reduced by Basic Filing Fee Paid SUBTOTAL (3) \*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY	TTED BY Complete (if applicable)				
Name (PrintlType)	Susan M. Pellegrino	Registration No. (Attomey/Agent)	48,972	Telephone	(203) 812-6450
Signature	Suson M. Releigun	ò		Date	12/17/01

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